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JUL 29 2004

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket No. (Optional) 8733.451.00

In re Application of	Joun Ho LEE	

Application Number	09/891,531	Filed	June 27, 2001

For:	IN-PLANE SWITCHING MODE LIQUID CRYSTAL DISPLAY DEVICE AND METHOD FOR MANUFACTURING THE SAME

Art Unit	2813	Examiner	E. J. Kielin

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

[X] One month (37 CFR 1.17(a)(1)) $ 110.00

[ ] Two months (37 CFR 1.17(a)(2)) $

[ ] Three months (37 CFR 1.17(a)(3)) $

[ ] Four months (37 CFR 1.17(a)(4)) $

[ ] Five months (37 CFR 1.17(a)(5)) $

[ ] Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: $ _____ .

[X] A check in the amount of the fee is enclosed.

[ ] Payment by credit card. Form PTO-2038 is attached.

[ ] The Director has already been authorized to charge fees in this application to a Deposit Account.

[X] The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number   50-0911   .

I have enclosed a duplicate copy of this sheet.

I am the

[ ] applicant/inventor.

[ ] assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

[ ] attorney or agent of record. Registration Number _____

[X] attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a)   41,786

July 29, 2004	
Date	Signature
(202) 496-7463	Rebecca Goldman Rudich
Telephone Number	Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

[X] Total of _____ 1 _____ forms are submitted.

07/30/2004 JBALINAN 00000043 09891531

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